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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 09/573,080 05/16/2000 PAT 6,828,097

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY KS	SHEETS DRAWING 8	TOTAL CLAIMS 45	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged Allowance <i>Chug</i> Examiner's Signature Initials				

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On TITLE *Chromosome structural abnormality localization with*
~~Single copy genomic hybridization probes and method of generating same~~ *Single copy probes*

FILING FEE RECEIVED 845	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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